

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS4223HHA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 06/10/2009
NAME OF PROVIDER OR SUPPLIER PREFERRED HOMECARE INFUSION LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 1677 HELM DRIVE SUITE B-2 LAS VEGAS, NV 89119		
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H 00	<p>INITIAL COMMENTS</p> <p>This Statement of Deficiencies was generated as a result of a State Licensure Survey conducted at your facility on 6/9/09 and finalized on 6/10/09 in accordance with Nevada Administrative Code, Chapter 449, Home Health Agencies.</p> <p>A Plan of Correction (POC) must be submitted. The POC must relate to the care of all patients and prevent such occurrences in the future. The intended completion dates and the mechanism(s) established to assure ongoing compliance must be included.</p> <p>Monitoring visits may be imposed to ensure on-going compliance with regulatory requirements.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>The following deficiencies were identified:</p>	H 00			
H131 SS=D	<p>449.770 Governing Body; Bylaws</p> <p>6. The governing body shall adopt bylaws or an acceptable equivalent in accordance with legal requirements. The bylaws must be written, revised as needed, and made available to all members of the governing body, the health division and the advisory group. the terms of the bylaws must include at least the following:</p> <p>(a) The basis upon which members of the governing body are selected, their terms of office of their duties and responsibilities.</p> <p>(b) A provision specifying to whom</p>	H131			

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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H131	Continued From page 1 responsibilities for the administration and supervision of the program and the evaluation of practices may be delegated, and the methods established by the governing body for holding those persons responsible. (c) A provision specifying the frequency of board meetings and requiring that minutes be taken at each meeting. (d) A provision requiring the establishment of personnel policies. (e) the agency's statements of objectives. This Regulation is not met as evidenced by: Based on document review and interview, the agency's governing body failed to address the administration's role in the delegation of the agency's program and practices. Findings include: On 6/9/09 in the morning, the Nurse Manager failed to provide documented evidence indicating the above provisions. Severity: 2 Scope: 1	H131		
H136 SS=D	449.773 Administrator 2. The administrator shall represent the governing body in the daily operation of the agency. His responsibilities include: (a) Keeping the governing body fully informed of the conduct of the agency through regularly written reports and by attendance at meetings of the governing body. (b) Employing qualified personnel and arranging for their orientation and continuing education. (c) Developing and implementing an accounting and reporting system that reflects the	H136		

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H136	Continued From page 2 fiscal experience and financial position of the agency. (d) Negotiating for services provided by contract in accordance with legal requirements and established policies of the agency. (e) Holding periodic meetings to maintain a liaison between the governing body, the advisory groups and the members of the staff. (f) Other duties as may be assigned. This Regulation is not met as evidenced by: Based on document review, the agency failed to include in the administrator's job description and duties: The administrator's involvement with accounting, negotiating for services and holding meetings to maintain communication with the governing body and the advisory groups and staff. Findings include: On 6/9/09 in the morning, the Nurse Manager failed to provide documented evidence indicating the above provisions. Severity: 2 Scope: 1	H136		
H139 SS=D	449.776 Director of Professional Services 2. The director of professional services shall: (a) Direct, supervise and coordinate the skilled nursing services and other therapeutic services provided by the agency. (b) Develop and revise written objectives for the care of the patients, policies and procedure manuals. (c) Assist in the development of descriptions of jobs. (d) Assist in the recruitment and selection of personnel. (e) Recommend to the administrator the	H139		

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H139	Continued From page 3 number and levels of members of the nursing staff. (f) Plan and conduct orientations and continuing education for members of the staff engaged in the care of patients. (g) Evaluate the performance of the nursing staff. (h) Assist in planning and budgeting for the provision of services. (i) Assist in establishing criteria for the admission and discharge of patients. This Regulation is not met as evidenced by: Based on document review, the agency failed to include 2b, 2e, and 2h as listed above as part of the Director of Professional Services' job responsibilities. Findings include: On 6/9/09 in the morning, the Nurse Manager failed to provide documented evidence indicating the above provisions. Severity 2 Scope: 1	H139		
H152 SS=F	449.782 Personnel Policies A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for: 6. The maintenance of employee records which confirm that personnel policies are followed; This Regulation is not met as evidenced by: NRS 449.179 (3)	H152		

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H152	<p>Continued From page 4</p> <p>Initial and periodic investigations of criminal history of employee or independent contractor of certain agency or facility.</p> <p>3. The administrator of, or the person licensed to operate, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups shall ensure that the criminal history of each employee or independent contractor who works at the agency or facility is investigated at least every 5 years. The administrator of person shall:</p> <p>(a) If the agency or facility does not have the fingerprints of the employee or independent contractor on file, obtain two sets of fingerprints from the employee or independent contractor;</p> <p>(b) Obtain written authorization from the employee or independent contractor to forward the fingerprints on file or obtained pursuant to paragraph (a) to the central repository for Nevada records of criminal history for submission to the Federal Bureau of Investigation for its report; and</p> <p>(c) Submit the fingerprints to the central repository for Nevada records of criminal history.</p> <p>Based on record review and interview, the agency failed to comply with the NRS 449.179 (3) for 4 of 11 employees (#2, #3, #4 and #5).</p> <p>Findings include:</p> <p>On 6/9/09 during personnel file review, Employees #2, #3, #4, and #5 did not contain results of the fingerprint background check as required by NRS 449.179 (3).</p> <p>Interview with the Nurse Manager revealed, the results have been sent to the regional office which was out of state and the agency did not receive a copy from the regional office.</p>	H152			

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H152	Continued From page 5	H152		
H153 SS=F	<p>Severity: 2 Scope: 3</p> <p>449.782 Personnel Policies</p> <p>A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for:</p> <p>7. The annual testing of all employees who have contact with patients for tuberculosis pursuant to NAC 441A.375; and</p> <p>This Regulation is not met as evidenced by: NAC 441A. 375</p> <p>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:</p> <p>(a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and</p> <p>(b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination. If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the</p>	H153		

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H153	<p>Continued From page 6</p> <p>facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.</p> <p>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.</p> <p>7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility in the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis.</p> <p>Based on record review and interview, the agency failed to comply with the NAC 441A. 375 for 4 of 11 employees (#3, #4, #8, and #9).</p>	H153			

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H153	<p>Continued From page 7</p> <p>Findings include:</p> <p>Employee #3 was hired on 10/31/07. Review of Employee #3's file revealed, a lack of documented evidence of a physical examination from a licensed physician upon hire.</p> <p>Employee #4 was hired on 10/7/05. Review of Employee #4's file revealed, lacked of documented evidence of a physical examination from a licensed physician, an initial 2-step tuberculosis screening tests upon hire and annually.</p> <p>Employee #8 was hired on 6/1/09. Review of Employee #8's file revealed, a lack of documented evidence of a physical examination from a licensed physician.</p> <p>Employee #9 was hired on 5/28/09. Review of Employee #9's file revealed, lacked of documented evidence of a physical examination from a licensed physician and an initial 2-step tuberculosis screening tests.</p> <p>On 6/9/09 in the afternoon, interview with the Administrator revealed, the original personnel files were kept and maintained in the regional office in Arizona.</p> <p>The Administrator further revealed, the agency must have not received the copies from the regional office.</p> <p>Severity: 2 Scope: 3</p>	H153			
H155 SS=F	<p>449.785 Contracts for Home Health Services</p> <p>If a home health agency provides home health</p>	H155			

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H155	Continued From page 8 services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must: 1. Provide for retention by the primary agency of responsibility for and control of the services. This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency's service contract failed to provide for retention by the primary agency of responsibility for and control of the services. Findings include: 1. The nurse manager provided a home health aide service contract on 5/28/09. 2. The contract failed to indicate the primary agency retained control of services. Severity: 2 Scope: 3	H155		
H159 SS=F	449.785 Contracts for Home Health Services If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must: 5. Provide for the reporting of clinical notes and observations by contracted personnel for inclusion in the records of the primary home health agency to facilitate planning and evaluating patient care and to document the care given. Periodic progress notes by appropriate members of the staff must be submitted at least every 14	H159		

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H159	Continued From page 9 days and more often if warranted by the patient's condition. This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency's home health aide contract failed to indicate a 14 day deadline for clinical staff to submit notes. Findings include: 1. The nurse manager provided a home health aide service contract. 2. The contract failed to indicate a 14 day deadline for clinical staff to submit notes. 3. The nurse manager failed to provide documented evidence the agency included a 14 day deadline in a policy statement for clinical staff to submit notes. Severity: 2 Scope: 3	H159			
H162 SS=F	449.785 Contracts for Home Health Services If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must: 8. Assure that personnel and services contracted for, meet the requirements specified in NAC 449.749 to 449.800, inclusive, for home health agency personnel and services, including licensure, personnel qualifications, medical examination, functions, supervision, orientation, inservice education and case conferences.	H162			

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H162	Continued From page 10 This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency's service contract failed to assure contracted personnel and services met requirements under Nevada Administrative Code (NAC) 449.749 to 449.800 inclusive. Findings include: 1. The nurse manager provided a home health aide service contract. 2. The contract failed to completely address the above referenced details of NAC 449.749 to 449.800 including licensure, personnel qualifications, medical examination, functions, orientation, and in-service education. Severity: 2 Scope: 3	H162		
H175 SS=F	449.793 Evaluation by Governing Body 1. The governing body of an agency is responsible for providing for an evaluation of the agency once a year. The purpose of the evaluation is to audit, review policies and procedures, and recommend additions or changes and ensure that the policies and regulations are being met. This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency failed to provide a policy statement for conducting an annual agency evaluation. Findings include: 1. Agency policies lacked a provision for an	H175		

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H175	Continued From page 11 annual agency evaluation to audit, review policies and procedures, recommend additions or changes, and ensure the policies and regulations were met. 2. The nurse manager failed to provide documented evidence of the above. Severity: 2 Scope: 3	H175			
H176 SS=F	449.793 Evaluation by Governing Body 2. A committee shall review all contracts and charters held by the agency to ascertain that: (a) Existing contracts are legal and up to date. (b) The existing contracts meet the needs of all parties involved. This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency failed to review all contracts annually to ascertain that existing contracts were legal and up to date and met the needs of all parties involved. Findings include: 1. Agency policies lacked a provision indicating the agency reviewed all contracts annually to ascertain that existing contracts were legal and up to date and met the needs of all parties involved. 2. The nurse manager failed to provide documented evidence of the above. Severity: 2 Scope: 3	H176			

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H177 SS=C	<p>449.793 Evaluation by Governing Body</p> <p>3. A committee shall review the management and office procedures of the agency to ascertain that:</p> <p>(a) The agency is being operated in the most effective and economical means while still giving quality service.</p> <p>(b) All office procedures are up to date, filing is correctly done and bookkeeping is meeting accepted accounting procedures and is current.</p> <p>(c) Equipment is in good repair an adequately meets operational needs.</p> <p>This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency failed to review management and office procedures in accordance with its annual evaluation.</p> <p>Findings include:</p> <p>1. Agency policies lacked a provision indicating the agency would review its management and office procedures to ascertain:</p> <p>(a) The agency was being operated in the most effective and economical means while still giving quality service.</p> <p>(b) All office procedures were up to date, filing was correctly done, and bookkeeping met current accepted accounting procedures.</p> <p>(c) Equipment was in good repair and adequately met operational needs.</p> <p>2. The nurse manager failed to provide documented evidence the agency reviewed its management and office procedures annually.</p> <p>Severity: 1 Scope: 3</p>	H177		

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H178	Continued From page 13	H178			
H178 SS=C	<p>449.793 Evaluation by Governing Body</p> <p>4. The committee shall submit a report to the governing body with any recommendations for changes and pertinent observations as it deems necessary.</p> <p>This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency failed to submit a report to the governing body with any recommendations for changes and pertinent observations it deemed necessary regarding its annual evaluation.</p> <p>Findings include:</p> <p>1. Agency policies lacked a provision indicating the agency would submit a report to the governing body with any recommendations for changes and pertinent observations it deemed necessary regarding its annual evaluation.</p> <p>2. The nurse manager failed to provide documented evidence of the above.</p> <p>Severity: 1 Scope: 3</p>	H178			
H179 SS=C	<p>449.793 Evaluation by Governing Body</p> <p>5. A committee shall review the medical and personnel policies to ensure that the policies are being fulfilled and necessary changes or additions are effected.</p> <p>This Regulation is not met as evidenced by: Based on record review and nurse manager interview, the agency failed to review its medical and personnel policies in accordance with its annual evaluation.</p>	H179			

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Bureau of Health Care Quality & Compliance

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NAME OF PROVIDER OR SUPPLIER PREFERRED HOMECARE INFUSION LLC			STREET ADDRESS, CITY, STATE, ZIP CODE 1677 HELM DRIVE SUITE B-2 LAS VEGAS, NV 89119		
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H179	Continued From page 14 Findings include: 1. Agency policies lacked a provision indicating the agency would review its medical and personnel policies in accordance with its annual evaluation. 2. The nurse manager failed to provide documented evidence the agency reviewed its medical and personnel policies annually. Severity: 1 Scope: 3	H179			
H180 SS=C	449.793 Evaluation by Governing Body 6. The governing body shall provide for a quarterly review of 10 percent of the records of patients who have received services during the preceding 3 months in each services area. The members of the committee must include an administrative representative, a physician, a registered nurse and a clerk or librarian who keeps records. The clerk or librarian shall review the clinical records to ensure that they are complete, that all forms are properly filled out and that documentation complies with good medical practices. The committee shall determine whether the services have been provided to the patients in an adequate and appropriate manner by all levels of service. The committee shall record any deficiencies and make necessary recommendations to the administrator. If the branch offices are small, two or more offices may establish one committee to review cases from each area. Each subunit agency must establish a committee to review cases within its area. Minutes of the committee's meetings must be documented and available for review. This Regulation is not met as evidenced by: Based on record review and nurse manager	H180			

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H180	Continued From page 15 interview, the agency's governing body failed to provide for a quarterly review of 10 percent of the records of patients who received services during the preceding 3 months in each service area. Findings include: 1. Agency policies lacked a provision indicating the agency's governing body provided a quarterly review of 10 percent of the records of patients who received services during the preceding 3 months in each service area. 2. The nurse manager failed to provide a policy and/or documented evidence that the agency's governing body provided a quarterly review of 10 percent of the records of patients who received services during the preceding 3 months in each service area. Severity: 1 Scope: 3	H180			
H193 SS=D	449.797 Contents of Clinical Records 10. A record of the termination of services, including the date and reason for termination and the time when the physician was notified of the termination. This Regulation is not met as evidenced by: Based on record review and nurse manager/infusion coordinator interview, the agency failed to provide documented evidence of an agency discharge for 2 of 21 patients (#17 and #18). Findings include:	H193			

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H193	<p>Continued From page 16</p> <p>The agency admitted Patient #17 on 4/23/09.</p> <p>1. On 5/6/09, a skilled nurse note indicated the nurse discharged Patient #17 in the care of a spouse.</p> <p>2. On 6/10/09, a review of the agency's discharge policy #725C indicated the the nurse would either complete a paper form or update the pharmacy discharge form.</p> <p>3. The nurse manager/infusion coordinator provided samples of both forms after policy discussion.</p> <p>4. Patient #17's file lacked both of the above forms.</p> <p>The agency admitted Patient #18 on 5/1/09.</p> <p>1. On 5/19/09, the nurse manager indicated Patient #18 was moving to Utah in a progress note and indicated an agency there would infuse Patient #18.</p> <p>2. On 5/21/09, a skilled nurse note indicated Patient #18 was moving to Utah that day.</p> <p>3. On 6/10/09, the nurse manager/infusion coordinator failed to provide documented evidence of Patient #18's discharge.</p> <p>Severity: 2 Scope: 1</p>	H193			
H195 SS=A	<p>449.800 Medical Orders</p> <p>2. Initial medical orders, renewals and changes of orders for skilled nursing and other therapeutic</p>	H195			

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H195	Continued From page 17 services submitted by telephone must be recorded before they are carried out All medical orders must bear the signature of the physician who initiated the order within 20 working days after receipt of the oral order. This Regulation is not met as evidenced by: Based on record review, the agency failed to ensure physicians signed medical orders within 20 working days for 1 of 21 patients (Patient #10). Findings include: One plan of care failed to meet Nevada Administrative Code 449.800(2) for Patient #10. Severity: 1 Scope: 1	H195		
H197 SS=C	449.800 Medical Orders 5. The agency must have an established policy regarding the administration of injectable narcotics and other drugs subject to the drug abuse law. If the policy allows the administration of injectable narcotics and other dangerous drugs subject to drug abuse law, they must be prescribed according to state regulations. This Regulation is not met as evidenced by: Based on record review, the agency failed to address Nevada Administrative Code 449.800 (5) within its narcotics/dangerous drugs policy. Findings include: The agency's narcotic policy, #715, failed to indicate whether controlled substances and other dangerous drugs were prescribed according to state regulations.	H197		

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H197	Continued From page 18	H197		
H200 SS=E	<p>Severity: 1 Scope: 3</p> <p>449.800 Medical Orders</p> <p>8. New orders are required when there is a change in orders, a change of physician or following hospitalization. This Regulation is not met as evidenced by: Based on record review and nurse manager/infusion coordinator interview, the agency failed to obtain new orders to address plan of care changes for 4 of 21 patients (Patient #5, #6, #8, and #18).</p> <p>Findings include:</p> <p>1. Patient #5 failed to receive ordered daily skilled nurse visits between 5/1/09 and 5/22/09. The file lacked orders reducing or cancelling the visits.</p> <p>2. Patient #6 failed to receive ordered twice weekly skilled nurse visits between 2/16/09 to 2/22/09, 2/23/09 to 3/1/09, and 3/23/09 to 3/29/09. The file lacked orders reducing or cancelling the visits.</p> <p>3. Patient #8 failed to receive an ordered once per week skilled nurse visit between 5/18/09 and 5/24/09. The file lacked an order cancelling the visit.</p> <p>4. Patient #18 failed to receive an ordered once per week skilled nurse visit between 5/11/09 and 5/17/09. The file lacked an order cancelling the visit.</p> <p>5. The nurse manager/ infusion coordinator indicated varying reasons for the missing visits.</p>	H200		

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H200	Continued From page 19 They indicated progress/communication notes addressed changes in visits, but they did not realize a reduction or addition in visits constituted changes to the plans of care. Severity: 2 Scope: 2	H200			

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